Case 25-20998-GLT Doc 15 Filed 05/10/25 Entered 05/10/25 16:50:28 Desc Main Document Page 1 of 52

Fill in this info	rmation to identify your	case:	./		
Debtor 1	Reshaad Reed				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name	-	
United States Bankruptcy Court for the:		WESTERN DISTRICT	OF PENNSYLVANIA		
Case number	25-20998				
(if known)					Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	175,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	54,611.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	229,611.00
Pa	rt 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	387,784.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	2,088.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	14,637.00
	Your total liabilities	\$	404,509.00
Ра	rt 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	10,961.08
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	10,986.00
Pa	Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
7.	■ Yes What kind of debt do you have?		

the court with your other schedules.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

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Debtor 1 Reshaad Reed Case number (if known) 25-20998

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____8,921.56

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clair	m
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	2,088.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	2,088.00

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		Docum	ent Page 3 of 52			
Fill in this ir	າformation to identify yoເ	ır case and this filing:				
Debtor 1	Reshaad Reed					
Debtor 2	First Name	Middle Name	Last Name			
(Spouse, if filing)	First Name	Middle Name	Last Name			
United State	s Bankruptcy Court for the	WESTERN DISTRICT	OF PENNSYLVANIA			
Case numbe	or 25 20009				ſ	
Sase Humbe	er <u>25-20998</u>				L	Check if this is ar amended filing
Official	Form 106A/B					
_	ule A/B: Pro	nertv				12/15
			once. If an asset fits in more than	one category list the	asset in ti	
□ No. Go to	, , ,	ble interest in any residence	, building, land, or similar property	?		
	1.1 159 Westminster Drive Street address, if available, or other description		e property? Check all that apply gle-family home blex or multi-unit building adominium or cooperative	the amount of an	ny secured	ms or exemptions. Put claims on <i>Schedule D:</i> s <i>Secured by Property.</i>
		□ ^{OS}	nufactured or mobile home			
Monro	eville PA 15	5146-0000 □ Lar	nd	Current value of entire property?		Current value of the portion you own?
City	State	_	estment property	\$350,00	00.00	\$175,000.00
		☐ Tim	eshare		•	ur ownership interest
		_ = =:	an interest in the property? Check or	. 116		ncy by the entireties, or
			otor 1 only	Fee simple		
Allegh	eny	☐ Del	otor 2 only			
County		□ Del	otor 1 and Debtor 2 only	— Chack if thi	io io oomn	unity proporty
		■ At I	east one of the debtors and another	(see instruction		nunity property
			rmation you wish to add about this dentification number:	item, such as local		
		Resider				
		Fair Ma	rket Value Determined By Cased for \$335,000.00 in July			
			<u> </u>			
2 Add the	dollar value of the portio	n you own for all of your	entries from Part 1, including	any entries for		
			entries from Part 1, including			\$175,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

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Debtor '	Reshaad Reed		Case number (if known)	25-20998
Cars.	vans, trucks, tractors, sport utility	vehicles, motorcycles		
,	,,a,a, open a,	,,		
☐ No				
■ Ye	s			
3.1 N	lake: Dodge	Who has an interest in the property? Check one		ured claims or exemptions. Put
N	Model: Challenger	■ Debtor 1 only		secured claims on Schedule D: ve Claims Secured by Property.
	Year: 2017	Debtor 2 only	Current value of t	
Α	pproximate mileage:	Debtor 1 and Debtor 2 only	entire property?	the Current value of the portion you own?
C	Other information:	☐ At least one of the debtors and another		
L	ocation: 159 Westminster			
D	rive, Monroeville PA 15146	☐ Check if this is community property (see instructions)	\$26,800	\$26,800.00
		(See Instructions)		
	Dadas		Do not deduct seco	ured claims or exemptions. Put
3.2 N	Make: Dodge	Who has an interest in the property? Check one	the amount of any	secured claims on Schedule D:
N	Model: Charger	Debtor 1 only	Creditors Who Have	ve Claims Secured by Property.
	'ear: 2016	Debtor 2 only	Current value of t	
	pproximate mileage:	_ Debtor 1 and Debtor 2 only	entire property?	portion you own?
_	Other information:	At least one of the debtors and another		
	ocation: 159 Westminster Prive, Monroeville PA 15146	Chack if this is somewhite property	\$15,250	.00 \$15,250.00
	currently inoperable	Check if this is community property (see instructions)		
	· ·	_		
☐ Ye	S			
5 Add	the dollar value of the portion you	own for all of your entries from Part 2, includin	g any entries for	* 40.050.00
.page	es you have attached for Part 2. Wri	te that number here	=>	\$42,050.00
	Describe Your Personal and Household			
Do you	own or have any legal or equitable	interest in any of the following items?		Current value of the portion you own?
				Do not deduct secured
. Hous	ehold goods and furnishings			claims or exemptions.
	mples: Major appliances, furniture, line	ens, china, kitchenware		
)			
■ Ye	es. Describe			
		sehold Goods & Furnishings		
		ailable Upon Request 9 Westminster Drive, Monroeville PA 1514	6	\$3,000.00
	Location: 100	Westimister Brive, Mornocvine 1 A 1014		+-/
. Elect		video, stereo, and digital equipment; computers, pi	rintore econoare: music o	allactions: alactronic davisos
Lxaii	including cell phones, cameras		illiters, scarillers, music co	ollections, electronic devices
	• .			
■ Ye	es. Describe			
			1	
		s Electronics		
		ailable Upon Request Nestminster Drive, Monroeville BA 1514	6	\$3.000.00

Official Form 106A/B Schedule A/B: Property page 2

Case 25-20998-GLT Doc 15 Filed 05/10/25 Entered 05/10/25 16:50:28 Page 5 of 52 Document Case number (if known) 25-20998 Debtor 1 **Reshaad Reed** 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$800.00 Location: 159 Westminster Drive, Monroeville PA 15146 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... Jewelry \$100.00 Location: 159 Westminster Drive, Monroeville PA 15146 13. Non-farm animals Examples: Dogs, cats, birds, horses □ No Yes. Describe..... \$0.00 Location: 159 Westminster Drive, Monroeville PA 15146 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$6,900.00 for Part 3. Write that number here

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

□ No

Yes.....

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Case number (if known) 25-20998 Debtor 1 **Reshaad Reed** Cash \$41.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... \$500.00 Chase 17.1. Checking 17.2. Checking Chase \$20.00 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: **Thrift Savings Plan** \$5,100.00 **Department of Defense Pension** \$0.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No

Official Form 106A/B Schedule A/B: Property page 4

Case 25-20998-GLT Doc 15 Filed 05/10/25 Entered 05/10/25 16:50:28 Page 7 of 52 Document Debtor 1 Case number (if known) 25-20998 **Reshaad Reed** ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Beneficiary: Surrender or refund Company name: value: **Term Life Insurance Through Employer** wife \$0.00 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

■ No

☐ Yes. Describe each claim.......

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

■ No

☐ Yes. Describe each claim.......

35. Any financial assets you did not already list

■ No

☐ Yes. Give specific information..

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Deb	tor 1	Reshaad Reed		Case number (if known)	25-20998	
36.		the dollar value of all of your entries from Part 4, including art 4. Write that number here		ges you have attached		\$5,661.00
Part	5: Des	scribe Any Business-Related Property You Own or Have an Intere	est In. List any real esta	ate in Part 1.		
37. D	o you c	own or have any legal or equitable interest in any business-relate	d property?			
	No. Go	to Part 6.				
	Yes. G	Go to line 38.				
Part		scribe Any Farm- and Commercial Fishing-Related Property You ou own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.		
46. [Do you	own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?		
	No.	Go to Part 7.				
	☐ Yes	. Go to line 47.				
Part	7.	Describe All Property You Own or Have an Interest in That You	Did Not List Above			
ган	۲.	Describe All Property Tou Own or have an interest in That Tou	Did Not List Above			
		have other property of any kind you did not already list?				
	Examp I No	oles: Season tickets, country club membership				
		Give specific information				
_	1 163.	Give specific information				
54.	Add t	he dollar value of all of your entries from Part 7. Write tha	t number here			\$0.00
Part	8:	List the Totals of Each Part of this Form				
55.	Part 1	l: Total real estate, line 2				\$175,000.00
56.	Part 2	2: Total vehicles, line 5	\$42,050.00			· · · · · · · · · · · · · · · · · · ·
57.	Part 3	3: Total personal and household items, line 15	\$6,900.00			
58.	Part 4	1: Total financial assets, line 36	\$5,661.00			
59.	Part 5	5: Total business-related property, line 45	\$0.00			
60.	Part 6	6: Total farm- and fishing-related property, line 52	\$0.00			
61.	Part 7	7: Total other property not listed, line 54 +	\$0.00			
62.	Total	personal property. Add lines 56 through 61	\$54,611.00	Copy personal property to	otal	\$54,611.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$	229,611.00

Official Form 106A/B Schedule A/B: Property page 6

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Fill in this infor	mation to identify your	case:	./	
Debtor 1	Reshaad Reed			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		WESTERN DISTRICT (OF PENNSYLVANIA	
Case number	25-20998			
(if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/25

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B*: *Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2*: *Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	rt 1: Identify the Property You Claim as E	Exempt			
1.	Which set of exemptions are you claiming	? Check one only, eve	n if yo	ur spouse is filing with you.	
	☐ You are claiming state and federal nonbar				
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	159 Westminster Drive Monroeville, PA 15146 Allegheny County	\$175,000.00		\$1,820.00	11 U.S.C. § 522(d)(1)
	Residence Fair Market Value Determined By Comparable Sales **purchased for \$335,000.00 in July 2024 Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
	2017 Dodge Challenger	\$26,800.00		\$2,159.00	11 U.S.C. § 522(d)(2)
	Location: 159 Westminster Drive, Monroeville PA 15146 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
	Various Household Goods & Furnishings	\$3,000.00		\$3,000.00	11 U.S.C. § 522(d)(3)
	Summary Available Upon Request Location: 159 Westminster Drive, Monroeville PA 15146 Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
	Miscellaneous Electronics Summary Available Upon Request	\$3,000.00		\$3,000.00	11 U.S.C. § 522(d)(3)
	Location: 159 Westminster Drive, Monroeville PA 15146			100% of fair market value, up to any applicable statutory limit	

Line from Schedule A/B: 7.1

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Dept	Resnaad Reed			Case number (if known)	25-20998
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own		ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	Clothing _ocation: 159 Westminster Drive.	\$800.00		\$800.00	11 U.S.C. § 522(d)(3)
ľ	Monroeville PA 15146 Line from <i>Schedule A/B</i> : 11.1			100% of fair market value, up to any applicable statutory limit	
	Jewelry Location: 159 Westminster Drive,	\$100.00		\$100.00	11 U.S.C. § 522(d)(4)
	Monroeville PA 15146 Line from <i>Schedule A/B</i> : 12.1			100% of fair market value, up to any applicable statutory limit	
	2 dogs Location: 159 Westminster Drive,	\$0.00		\$0.00	11 U.S.C. § 522(d)(3)
ſ	Monroeville PA 15146 Line from Schedule A/B: 13.1			100% of fair market value, up to any applicable statutory limit	
	Cash Line from <i>Schedule A/B</i> : 16.1	\$41.00		\$41.00	11 U.S.C. § 522(d)(5)
-	and norm concedure / v.S. 1411			100% of fair market value, up to any applicable statutory limit	
	Checking: Chase Line from Schedule A/B: 17.1	\$500.00		\$500.00	11 U.S.C. § 522(d)(5)
-	and non-ourself to the control of th			100% of fair market value, up to any applicable statutory limit	
	Checking: Chase Line from Schedule A/B: 17.2	\$20.00		\$20.00	11 U.S.C. § 522(d)(5)
	and non concedure / v.s. · · · · ·			100% of fair market value, up to any applicable statutory limit	
	Γhrift Savings Plan Line from Schedule A/Β: 21.1	\$5,100.00		\$5,100.00	11 U.S.C. § 522(d)(12)
-	and non concedency v.S. 2111			100% of fair market value, up to any applicable statutory limit	
	Department of Defense Pension Line from Schedule A/B: 21.2	\$0.00		\$0.00	11 U.S.C. § 522(d)(12)
	ane nom <i>Schedule A.B.</i> 21.2			100% of fair market value, up to any applicable statutory limit	
	Ferm Life Insurance Through Employer	\$0.00		\$0.00	11 U.S.C. § 522(d)(7)
E	Beneficiary: wife ine from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
(I	Are you claiming a homestead exemption Subject to adjustment on 4/01/28 and every No Yes. Did you acquire the property cover No Yes	3 years after that for ca	ises fi	,	,

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	00.00 =0		Document F	age 11	of 52		
Filli	in this informat	ion to identify you	case:				
Deb	tor 1	Reshaad Reed					
	_	First Name	Middle Name L	ast Name			
	tor 2						
(Spou	ise if, filing)	First Name	Middle Name L	ast Name			
Unit	ed States Bankr	uptcy Court for the:	WESTERN DISTRICT OF PENNS	SYLVANIA			
Cas	e number 25-	20998					
(if kno	own)						if this is an
						ameno	led filing
Off;	cial Form 1	IOED					
Sc	hedule D	: Creditors	Who Have Claims So	ecured	by Propert	у	12/15
is nee			two married people are filing together, ut, number the entries, and attach it to t				
1. Do	any creditors have	ve claims secured by	your property?				
ı	□ No. Check thi	is box and submit th	is form to the court with your other sc	hedules. You	ı have nothing else t	o report on this form.	
		of the information b	·		a		
			elow.				
Part	List All S	ecured Claims			Column A	Column B	Column C
			nore than one secured claim, list the creditors in a particular claim, list the other creditors in		Amount of claim	Value of collateral	Unsecured
			al order according to the creditor's name.	Fall 2. As	Do not deduct the value of collateral.	that supports this	portion If any
2.1	American Cr	edit			¢46.702.00	¢45 250 00	¢4 522 00
2	Acceptance		Describe the property that secures the	claim:	\$16,783.00	\$15,250.00	\$1,533.00
	Creditor's Name		2016 Dodge Charger				
			Location: 159 Westminster Dri Monroeville PA 15146	ve,			
			**currently inoperable				
	961 E. Main	Stroot	As of the date you file, the claim is: Che	eck all that			
	Spartanburg		apply.				
	Number, Street, City	<u> </u>	☐ Contingent ☐ Unliquidated				
	rambor, oncot, on	y, clate a zip code	☐ Disputed				
Who	owes the debt?	Check one.	Nature of lien. Check all that apply.				
■ D	ebtor 1 only		☐ An agreement you made (such as mo	rtgage or secu	red		
_	ebtor 2 only		car loan)				

☐ Debtor 1 and Debtor 2 only

community debt

 $\hfill\Box$ Check if this claim relates to a

Date debt was incurred 2019

 $\hfill \square$ At least one of the debtors and another

 \square Statutory lien (such as tax lien, mechanic's lien)

Last 4 digits of account number

Auto Loan

5881

 $\hfill \square$ Judgment lien from a lawsuit

Other (including a right to offset)

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Debtor 1 Reshaad Reed		Case number (if known)	25-20998	
First Name Middle N	ame Last Name			
2.2 BSI Financial Srvs	Describe the property that secures the clai	m: \$11,546.00	\$350,000.00	\$0.00
Creditor's Name Attn: Bankruptcy	159 Westminster Drive Monroevill PA 15146 Allegheny County Residence Fair Market Value Determined By Comparable Sales **purchased for \$335,000.00 in June 1500.00 in June 150			
4200 Regent Blvd. Ste B200 Irving, TX 75063	As of the date you file, the claim is: Check all apply. Contingent	I that		
Number, Street, City, State & Zip Code	☐ Unliquidated			
rumbor, oncor, ony, orate a zip code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	An agreement you made (such as mortgag car loan)	ge or secured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's	ilen)		
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset) Mort	gage		
Opened 07/24 Last Active 3/19/25		7500		
2.3 Driveway Finance Corp	Describe the property that secures the clai	m: \$24,641.00	\$26,800.00	\$0.00
Creditor's Name	2017 Dodge Challenger Location: 159 Westminster Drive,			
Attn: Bankruptcy 150 N. Bartlett St. Medford, OR 97501	Monroeville PA 15146 As of the date you file, the claim is: Check al apply. Contingent	I that		
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage car loan)	ge or secured		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's	s lien)		
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit	,		
☐ Check if this claim relates to a community debt	Other (including a right to offset)	Loan		
Opened 08/22 Last Active Date debt was incurred 2/26/25	Last 4 digits of account number	9577		

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Debtor 1 Reshaad Reed				ase number (if known)			
First Name	Middle Na	ame Last Name	_				
2.4 LoanDepot		Describe the property that secures	the claim:	\$334,814.00	\$350,000.00	\$0.00	
Creditor's Name Attn: Bankrup	•	159 Westminster Drive Mon PA 15146 Allegheny County Residence Fair Market Value Determine Comparable Sales **purchased for \$335,000.00 2024 As of the date you file, the claim is:	ed By in July				
26642 Towne (Foothill Ranch		apply. Contingent					
Number, Street, City, S	State & Zip Code	☐ Unliquidated					
Who owes the debt?	check one.	☐ Disputed Nature of lien. Check all that apply.					
☐ Debtor 1 only ☐ Debtor 2 only		☐ An agreement you made (such as car loan)	mortgage or secu	ured			
Debtor 1 and Debtor 2	? only	☐ Statutory lien (such as tax lien, mechanic's lien)					
At least one of the deb	otors and another	☐ Judgment lien from a lawsuit					
☐ Check if this claim re community debt	elates to a	Other (including a right to offset)	Mortgage				
Date debt was incurred	Opened 07/24 Last Active 04/25	Last 4 digits of account num	ber 9925				
	-	olumn A on this page. Write that num		\$387,784	l.00		
If this is the last page Write that number here	•	the dollar value totals from all pages.		\$387,784	l.00		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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311	l in this info	ormation to identify your cas		ımenı Page	14 01 3	52		
			~ •					
De	btor 1	Reshaad Reed First Name	Middle Name	Last Nam	9			
	btor 2							
(Sp	ouse if, filing)	First Name	Middle Name	Last Nam	9			
Un	ited States I	Bankruptcy Court for the: W	ESTERN DISTR	RICT OF PENNSYLVA	NIA			
Ca	se number	25-20998						
	nown)						☐ Check	if this is an
							amend	ed filing
∩f	ficial Fo	rm 106E/F						
		E/F: Creditors Who	Have Uns	secured Claim	s			12/15
		and accurate as possible. Use Pa				or creditors with NON	PRIORITY claims. Li	
Sch Sch left. nam	edule G: Exe edule D: Cre Attach the C ne and case r	ontracts or unexpired leases that cutory Contracts and Unexpired ditors Who Have Claims Secured ontinuation Page to this page. If humber (if known).	Leases (Official I I by Property. If m you have no info	Form 106G). Do not inclu ore space is needed, co	ide any cre py the Par	editors with partially s rt you need, fill it out,	ecured claims that a number the entries in	re listed in note the boxes on the
		All of Your PRIORITY Unsec						
1.	Do any cred ☐ No. Go to	litors have priority unsecured cla	aims against you	?				
) Ραπ 2.						
2	Yes.	our priority unsecured claims. If	a creditor has more	than one priority upsecu	ed claim li	ist the creditor senarate	ly for each claim. For	each claim listed
۷.	identify what possible, list	type of claim it is. If a claim has be the claims in alphabetical order ac re than one creditor holds a particu	oth priority and non cording to the cred	priority amounts, list that olitor's name. If you have n	laim here	and show both priority a	nd nonpriority amount	ts. As much as
	(For an expla	anation of each type of claim, see t	he instructions for	this form in the instruction	booklet.)			
						Total claim	Priority amount	Nonpriority amount
2.1		epartment Of Revenue	Last 4 di	igits of account number	5881	\$2,088.00	\$2,088.00	\$0.00
	Bankı	Creditor's Name ruptcy Division ox 788	When wa	as the debt incurred?	2021			
		sburg, PA 17128	As of the	data yay fila tha alaim	io. Chaal	all that apply		
		r Street City State Zip Code red the debt? Check one.	☐ Conti	e date you file, the claim	is: Check	all that apply		
	■ Debtor		Unliqu					
	☐ Debtor	•	☐ Dispu					
		1 and Debtor 2 only		neu PRIORITY unsecured cla	ıim:			
		one of the debtors and another		estic support obligations				
	_	if this claim is for a community	_	s and certain other debts	ou owe the	a government		
		n subject to offset?		is for death or personal in		•		
	■ No	•						
	☐ Yes			State Inco	me Tax			
Pa	rt 2: List	All of Your NONPRIORITY U	nsecured Clain	ns				
3.	Do any cred	litors have nonpriority unsecure	d claims against y	you?				
	☐ No. You	have nothing to report in this part.	Submit this form to	the court with your other	schedules.			
	Yes.							
4.	unsecured c	our nonpriority unsecured claims laim, list the creditor separately for ditor holds a particular claim, list th	each claim. For ea	ach claim listed, identify w	nat type of	claim it is. Do not list cla	ims already included	in Part 1. If more

Total claim

Part 2.

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Debto	Reshaad Reed	Case number (if known) 25-20998	
4.1	American Credit Acceptance	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name		<u> </u>
	961 E. Main Street	When was the debt incurred?	
	Spartanburg, SC 29302		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Repossession□	
4.2	American Infosource	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name		<u> </u>
	PO Box 268941	When was the debt incurred?	
	Oklahoma City, OK 73126		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
		Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt	_	
	Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Unpaid Balance On Account	
		- Other, Specify	
4.3	AT&T	Last 4 digits of account number	\$695.00
	Nonpriority Creditor's Name One AT&T Way, Room 3A104	When was the debt incurred?	
	Bedminster, NJ 07921	When was the debt incurred:	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Unpaid Balance On Account	

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Debit	Resnaad Reed							
4.4	Becket & Lee	Last 4 digits of account number	\$0.00					
	Nonpriority Creditor's Name POB 3001 Malvorn, BA 10355	When was the debt incurred?						
	Malvern, PA 19355 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply						
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:						
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts						
	Yes	Other. Specify Notice Only	-					
4.5	Comcast Cable	Last 4 digits of account number	Unknown					
	PO Box 3005 Southeastern. PA 19398							
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply						
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	□ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:						
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts						
	☐ Yes	Other. Specify Unpaid Balance On Account	-					
4.6	Current	Last 4 digits of account number	\$0.00					
	Nonpriority Creditor's Name Attn: Bankruptcy 217 Centre St #180, New York, NY 10013	When was the debt incurred? Opened 2/23/24 Last Active 02/25	-					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply						
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:						
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not						
	Is the claim subject to offset?	report as priority claims						
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts						
	□Yes	Other Specify Notice Only						

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Debtor 1 Reshaad Reed Case number (if known) 25-20998 4.7 Last 4 digits of account number \$0.00 Dept Of Education/neln 4299 Nonpriority Creditor's Name Opened 11/10 Last Active Po Box 82561 When was the debt incurred? 3/07/23 Lincoln, NE 68501 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify **Notice Only Diversified Adjustment Services,** 2044 \$1,904.00 4.8 Last 4 digits of account number Nonpriority Creditor's Name Opened 12/26/24 Last Active Attn: Bankrupcty Po Box 32145 When was the debt incurred? 09/24 Fridley, MN 55432 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Unpaid Balance On Account** Other, Specify 4.9 **First Commonwealth** Last 4 digits of account number Unknown Nonpriority Creditor's Name 601 Philadelphia Street When was the debt incurred? Indiana, PA 15701 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Unpaid Balance On Account

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Case number (if known) Debtor 1 Reshaad Reed 25-20998 4.1 **First Premier Bank** 3070 \$285.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Opened 11/24 Last Active 3820 N Louise Ave When was the debt incurred? 04/25 Sioux Falls, SD 57107 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.1 **First Premier Bank** 3070 \$285.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 11/24 Last Active 3820 N Louise Ave When was the debt incurred? 04/25 Sioux Falls, SD 57107 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Credit Card** Other, Specify 4.1 **Jefferson Capital Syst** \$2,250.00 Last 4 digits of account number Nonpriority Creditor's Name 16 Mcleland Rd When was the debt incurred? Saint Cloud, MN 56303 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No **Unpaid Balance On Account** ☐ Yes Other. Specify

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Debtor 1 Reshaad Reed Case number (if known) 25-20998 4.1 Lvnv Funding Llc \$1,123.00 Last 4 digits of account number 3 Nonpriority Creditor's Name C/o Resurgent Capital Services When was the debt incurred? Greenville, SC 29602 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Unpaid Balance On Account ☐ Yes 4.1 **Navient** 0223 Last 4 digits of account number \$0.00 Nonpriority Creditor's Name Opened 06/05 Last Active Po Box 9500 When was the debt incurred? 8/31/23 Wilkes Barre, PA 18773 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other, Specify **Notice Only** 4.1 **Progressive Leasing** \$2,120.00 Last 4 digits of account number Nonpriority Creditor's Name 256 Data Drive When was the debt incurred? Draper, UT 84020 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Unpaid Balance On Account ☐ Yes

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Debtor 1 Reshaad Reed Case number (if known) 25-20998 4.1 **Resurgent Receiveables** \$1,255.00 Last 4 digits of account number 6 Nonpriority Creditor's Name **Resurgent Capital Services** When was the debt incurred? PO Box 10587 Greenville, SC 29603 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Unpaid Balance On Account ☐ Yes 4.1 T-mobile \$1,425.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 3625 32nd Avenue SE Bellevue, WA 98006 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Unpaid Balance On Account ☐ Yes 4.1 The Huntington National Bank \$0.00 8 Last 4 digits of account number Nonpriority Creditor's Name P O Box 89424 When was the debt incurred? Cleveland, OH 44101 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Unpaid Balance On Account ☐ Yes

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Case number (if known) Debtor 1 Reshaad Reed 25-20998 4.1 **Uplift Inc** 6344 Unknown Last 4 digits of account number 9 Nonpriority Creditor's Name Opened 08/18 Last Active 440 N Wolfe Road When was the debt incurred? 05/19 Sunnyvale, CA 94085 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Unpaid Balance On Account ☐ Yes 4.2 **UPMC Health Services** Unknown Last 4 digits of account number 0 Nonpriority Creditor's Name When was the debt incurred? PO Box 1123 Minneapolis, MN 55440 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical Debt** Other. Specify 4.2 **UPMC Physcian Services** Unknown Last 4 digits of account number Nonpriority Creditor's Name PO Box 371980 When was the debt incurred? Pittsburgh, PA 15259 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Medical Debt

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Debtor 1 Reshaad Reed Case number (if known) 25-20998 4.2 **Veritas Instrument Rental** \$2,070.00 Last 4 digits of account number 2 Nonpriority Creditor's Name 12475 44th Street N. When was the debt incurred? Clearwater, FL 33762 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Unpaid Balance On Account ☐ Yes 4.2 Verizon \$1,225.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 25505 When was the debt incurred? Lehigh Valley, PA 18002 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Unpaid Balance On Account ☐ Yes Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total Claim Domestic support obligations** 6a. 0.00 Total claims from Part 1 6b. Taxes and certain other debts you owe the government 6b. 2,088.00 6c. Claims for death or personal injury while you were intoxicated 6c. 0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. 0.00 Total Priority. Add lines 6a through 6d. 6e. 2,088.00 **Total Claim** Student loans 6f. 6f 0.00 Total claims Obligations arising out of a separation agreement or divorce that from Part 2 6g. 0.00 6g. you did not report as priority claims

6h.

Debts to pension or profit-sharing plans, and other similar debts

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 Debtor 1
 Reshaad Reed
 Case number (if known)
 25-20998

 6i.
 Other. Add all other nonpriority unsecured claims. Write that amount here.
 6i.
 \$ 14,637.00

 6j.
 Total Nonpriority. Add lines 6f through 6i.
 6j.
 \$ 14,637.00

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Fill in this infor	mation to identify your	case:		
Debtor 1	Reshaad Reed			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT (OF PENNSYLVANIA	
_	25-20998			
(if known)				☐ Check if this is
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with Name, Number	whom you have the , Street, City, State and ZIP	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.3	Oity		Otate	Zii Code	
2.0	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.5	Ony		State	211 0000	
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>

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Fill in thi	s information to identify your	case:	nt 1 age 20 or	02	
Debtor 1	Reshaad Reed				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, f	iling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	WESTERN DISTRICT C	OF PENNSYLVANIA		
Case nur	mber 25-20998				
(if known)					☐ Check if this is an amended filing
⊃tt: - ; ·	-l Fames 40011				3
	al Form 106H dule H: Your Cod	obtors			12/15
JUILE	dule II. Ioul Cou	cului 3			12/15
1. Do	es ithin the last 8 years, have you ona, California, Idaho, Louisiana, o. Go to line 3. es. Did your spouse, former spoublumn 1, list all of your codebte	you are filing a joint case, on lived in a community property Nevada, New Mexico, Publish, or legal equivalent live ors. Do not include your	operty state or territory? erto Rico, Texas, Washing with you at the time? spouse as a codebtor if	C (Community proper gton, and Wisconsin.	ng with you. List the person shown
Forn					the creditor on Schedule D (Official , Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Zl	P Code		Column 2: The cr Check all schedul	reditor to whom you owe the debt les that apply:
3.1	Angela Reed 159 Westminster Drive Monroeville, PA 15146			■ Schedule D, □ Schedule E/F □ Schedule G ■ SSI Financial S	-, line
3.2	Angela Reed 159 Westminster Drive Monroeville, PA 15146			■ Schedule D, □ Schedule E/F □ Schedule G LoanDepot	-, line

Official Form 106H Schedule H: Your Codebtors Page 1 of 1

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Fill	in this information t	to identify your ca	ase:		1			
	btor 1	Reshaad Re						
	btor 2 buse, if filing)							
Uni	ited States Bankrup	tcy Court for the	WESTERN DISTRICT	OF PENNSYLVANIA				
(If kr	nown)	-20998			□ A			chapter
	fficial Form				N	/IM / DD/ Y	YYY	
S	chedule I:	Your Inco	ome					12/15
atta	ch a separate she rt 1: Describ Fill in your empl	et to this form.		ith you, do not include informational pages, write your name and		umber (if I	known). Answer every	
	information.			Debtor 1		_	or non-filing spouse	
	If you have more attach a separate information about	page with	Employment status	■ Employed□ Not employed		■ Emplo	•	
	employers.		Occupation	MSA		Training	q	
	Include part-time, self-employed wo	'	Employer's name	Department of Veterans Af	fairs	All Care	Pharmacy	
	Occupation may or homemaker, if		Employer's address	421 Mall Circle Monroeville, PA 15146			nperor Blvd n, NC 27703	
			How long employed ti	here?				
Pai	rt 2: Give De	tails About Mor	thly Income					
	-	ome as of the da	•	you have nothing to report for any	line, write	e \$0 in the	space. Include your non	-filing
	ou or your non-filing e space, attach a s			ombine the information for all emplo	oyers for	that perso	n on the lines below. If y	ou need
					For Del	btor 1	For Debtor 2 or	

non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 3,678.13 5,301.64 2. 2. deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 0.00 0.00 Calculate gross Income. Add line 2 + line 3. 3,678.13 5,301.64

Official Form 106I Schedule I: Your Income page 1

Debt	or 1	Reshaad Reed	_	C	Case number (if kno	own)	25-20	998			
					For Debtor 1		For F	ebtor	2		
					For Deptor 1			filing s		2	
	Con	y line 4 here	4.	_	\$ 3,678.	13	\$		301.6		
		,					· —	,		_	
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	à.	\$ 427.	.69	\$		596.9	4	
	5b.	Mandatory contributions for retirement plans	5b			.00	\$		0.0		
	5c.	Voluntary contributions for retirement plans	50) .	\$ 345.		\$		63.0		
	5d.	Required repayments of retirement fund loans	50	ı.	\$ 237.		\$		43.1		
	5e.	Insurance	5e) .	\$ 186.		\$		272.2	24	
	5f.	Domestic support obligations	5f.		\$ 0.	.00	\$		0.0	0	
	5g.	Union dues	5g	J.	\$ 45.	.40	\$		0.0	0	
	5h.	Other deductions. Specify:	5h	1.+	\$ 0.	.00	+ \$		0.0	0	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$ 1,243.	.35	\$		975.3	34	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$2,434.	.78	\$	4,	326.3	0	
8.	List	all other income regularly received:									
	8a.	Net income from rental property and from operating a business,									
		profession, or farm Attach a statement for each property and business showing gross									
		receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	8a	ì.	\$ 0.	.00	\$		0.0	0	
	8b.	Interest and dividends	8b).	\$ 0.	.00	\$		0.0	0	
	8c.	Family support payments that you, a non-filing spouse, or a dependent									
		regularly receive									
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80		\$ 0.	.00	\$		0.0	ω.	
	8d.	Unemployment compensation	80		·	.00	\$		0.0		
	8e.	Social Security	86		·	.00	\$		0.0		
	8f.	Other government assistance that you regularly receive			· ———						
		Include cash assistance and the value (if known) of any non-cash assistance	•								
		that you receive, such as food stamps (benefits under the Supplemental									
		Nutrition Assistance Program) or housing subsidies. Specify: VA Disability	8f.		\$ 4,200	00	\$		0.0	ω.	
	8g.	Pension or retirement income	8g			.00	\$		0.0		
	8h.	Other monthly income. Specify:		,	·	.00	· —		0.0		
				_			<u> </u>				
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	4,200	.00	\$		0.	00	
			г								
10.	Cald	culate monthly income. Add line 7 + line 9.	10.	\$	6,634.78	+ \$	4,32	26.30	= \$	10,9	61.08
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.									
11.	Stat	e all other regular contributions to the expenses that you list in Schedule	J.								
		ude contributions from an unmarried partner, members of your household, your	depe	ende	ents, your roomr	nates	, and				
		er friends or relatives.	:	_ _ _		- 1:-4	: - C.	. la a all.	. ,		
	Spe	not include any amounts already included in lines 2-10 or amounts that are not cify:	avalli	abie	to pay expense	es iist	∋a in Sc 	neauie 11.			0.00
40	A -1 -	I she amount in the last column of line 40 to the amount in the 40.	. 10 .		and the state of			1			
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certai									
	appl		III LIA	iDIIIL	ies and Related	Data	, 11 11	12.	\$	10,9	61.08
									Com	اممطا	
										bined hly ind	ome
13.	Do	you expect an increase or decrease within the year after you file this form	?							,	30
		No.									
	П	Vec Evolain:									

Official Form 106l Schedule I: Your Income page 2

E	a Alaia in Cana	tion to identify				I		
FIII II	n this informa	tion to identify yo	our case:					
Debte	or 1	Reshaad Re	ed				ck if this is:	
Debte	or 2						An amended filing A supplement show	wing postpetition chapter
	use, if filing)						13 expenses as of	
Unite	d States Bankr	uptcy Court for the	: WESTE	ERN DISTRICT OF PENNS	SYLVANIA		MM / DD / YYYY	
Case	number 25	5-20998						
(If kn	own)							
Of	ficial Fo	rm 106J						
		J: Your	Exper	ises				12/15
Be a infor	s complete a rmation. If m ber (if know	and accurate as	s possible eded, atta	. If two married people and the control of the cont				or supplying correct
Part 1.	1: Descr Is this a join	ibe Your House	ehold					
	■ No. Go to	line 2.	in a conor	ata hausahald2				
	□ res. Doe		iii a sepai	ate household?				
			st file Offic	ial Form 106J-2, Expenses	s for Separate House	ehold of Deb	otor 2.	
2.	Do you have	e dependents?	□ No					
	Do not list De Debtor 2.	•	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents				Daughter		9	Yes
							4.4	□ No
					Son		14	■ Yes
					Son - student		26	□ No
					Jon - Student			■ Yes □ No
								☐ Yes
3.	expenses of	penses include f people other t d your depende	:han _	No Yes				
Part	2: Estim	ate Your Ongoi	ing Month	ly Expenses				
Esti	mate your ex	penses as of y	our bankr	uptcy filing date unless yey is filed. If this is a supp	ou are using this followed are using the following the fol	orm as a sı e <i>J</i> , check t	upplement in a Cha he box at the top o	apter 13 case to report of the form and fill in the
• •			_					
the v	ude expense value of such icial Form 10	n assistance an	non-cash id have in	government assistance i cluded it on Schedule I: \	if you know Your Income		Your exp	enses
4	The would'		. In law		la alcada Cast			
4.		or nome owners and any rent for th		nses for your residence. I or lot.	nclude first mortgage	e 4. :	\$	2,580.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. S	\$	0.00
		rty, homeowner'	s, or rente	's insurance		4b.	·	0.00
				upkeep expenses		4c.		100.00
_		owner's associa		dominium dues		4d.		0.00

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. \$ =	590.00 301.00 575.00 0.00 1,400.00
. \$. \$. \$. \$	301.00 575.00 0.00
. \$	575.00 0.00
. \$. \$. \$	0.00
. \$. \$	0.00
. \$	
. \$	1.700.00
. \$	0.00
· -	200.00
	175.00
. \$	175.00
. Ψ	
. \$	500.00
. \$	250.00
. \$	0.00
· —	
. \$	0.00
. \$	0.00
·	157.00
·	0.00
. Ψ	0.00
. \$	0.00
. Ψ	0.00
\$	846.00
·	0.00
· -	
	905.00
. Ф	525.00
\$	0.00
· ·	0.00
· ·	0.00
	0.00
· -	0.00
	0.00
	0.00
·	0.00
. +\$	150.00
+\$	200.00
+\$	50.00
+\$	1,154.00
	40.000.00
	10,986.00
\$_	
\$	10,986.00
¢	10.061.00
· ·	10,961.08
\$	10,986.00
. \$	-24.92
payment to in	crease or decrease because of a
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oci o a oci s	+\$ +\$ \$ \$ \$

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Fill in this inform	ation to identify your	case:			
Debtor 1	Reshaad Reed				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	kruptcy Court for the:	WESTERN DISTRICT	OF PENNSYLVANIA		
Case number (if known)	5-20998				☐ Check if this is an amended filing
Official Form					
Declarati	ion About a	ın Individual	Debtor's Scl	nedules	12/15
obtaining money years, or both. 18		n connection with a ban	s or amended schedules. I kruptcy case can result in		it, concealing property, or imprisonment for up to 20
Did you pay	or agree to pay some	one who is NOT an atto	rney to help you fill out ba	nkruptcy forms?	
■ No					
☐ Yes. Na	ame of person				cy Petition Preparer's Notice, I Signature (Official Form 119)
	ty of perjury, I declare true and correct.	that I have read the sun	nmary and schedules filed	with this declaration ar	nd
X /s/ Resh	naad Reed		X		
Reshaa			Signature of D	Debtor 2	

Date May 10, 2025

Date

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Fill	in this info	rmation to identify you	case:						
Deb	tor 1	Reshaad Reed							
Dah	tor 2	First Name	Middle Name	Last Name					
	use if, filing)	First Name	Middle Name	Last Name					
Unit	ed States E	Sankruptcy Court for the:	WESTERN DISTRICT OF	PENNSYLVANIA					
Cas	e number	25-20998							
(if kno					_ c	heck if this is an			
					a	mended filing			
Off	ficial F	orm 107							
		-	Affairs for Individ	duals Filing for B	ankruntcy	04/25			
					equally responsible for supply additional pages, write you				
		wn). Answer every que			, p , ,				
Part	1: Give	Details About Your Ma	rital Status and Where You	Lived Before					
1.	What is yo	ur current marital statu	s?						
	■ Marrie	ed							
	□ Not m	arried							
2.	During the	Ouring the last 3 years, have you lived anywhere other than where you live now?							
	_								
	■ No	No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.							
	☐ Yes. L	ist all of the places you l	ved in the last 3 years. Do no	ot include where you live now	<i>'</i> .				
	Debtor 1:		Dates Debtor 1	Debtor 2 Prior Ad	dress:	Dates Debtor 2			
			lived there			lived there			
					ity property state or territory				
state	s and territo	ories include Arizona, Ca	lifornia, Idaho, Louisiana, Ne	vada, New Mexico, Puerto R	co, Texas, Washington and W	isconsin.)			
	No								
	☐ Yes. M	Make sure you fill out Sch	nedule H: Your Codebtors (Ot	fficial Form 106H).					
Port	2 Evnl	ain the Sources of Vou	r Incomo						
Part	Expi	ain the Sources of You	Income						
					ear or the two previous caler	ndar years?			
			u received from all jobs and a have income that you receive						
		inig a joint babb and you	That's most mother that you recent	o togothor, not it only onloo ur	1001 200101 11				
	□ No								
	Yes. F	fill in the details.							
			Debtor 1		Debtor 2				
			Sources of income	Gross income	Sources of income	Gross income			
			Check all that apply.	(before deductions and	Check all that apply.	(before deductions and exclusions)			
_		4 - 6		exclusions)	_	and exclusions			
		1 of current year until led for bankruptcy:	■ Wages, commissions,	\$13,012.17	☐ Wages, commissions, bonuses, tips				
	,		bonuses, tips						
			Operating a business		☐ Operating a business				

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Debtor 1 Reshaad Reed Case number (if known) 25-20998

Check all that apply. (before deductions and exclusions) For last calendar year: (January 1 to December 31, 2024) Wages, commissions, bonuses, tips Operating a business Operat	List each source and the gross inco No Yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2024) For the calendar year before that:	Debtor 1 Sources of income Describe below. VA Disability VA Disability	Gross income from each source (before deductions and exclusions) \$12,600.00	Debtor 2 Sources of income Describe below. Social Security Benefits Social Security Benefits Social Security	(before deductions	
Check all that apply. Check deductions and exclusions Check all that apply. (before deductions and exclusions)	List each source and the gross inco No Yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy: For last calendar year:	Debtor 1 Sources of income Describe below. VA Disability	Gross income from each source (before deductions and exclusions) \$12,600.00	Debtor 2 Sources of income Describe below. Social Security Benefits Social Security	(before deductions and exclusions) \$0.00	
Check all that apply. (before deductions and exclusions) For last calendar year: (January 1 to December 31, 2024) Wages, commissions, bonuses, tips Operating a business Operating a business For the calendar year before that: (January 1 to December 31, 2023) Wages, commissions, bonuses, tips Operating a business For the calendar year before that: (January 1 to December 31, 2023) Wages, commissions, bonuses, tips Operating a business For the calendar year before that: (January 1 to December 31, 2023) Wages, commissions, bonuses, tips Operating a business For the calendar year before that: (January 1 to December 31, 2023) Wages, commissions, bonuses, tips Operating a business S14,250.00 Wages, commissions, bonuses, tips Operating a business Operating a business S14,250.00 Operating a business For the calendar year before that: (January 1 to December 31, 2023) Wages, commissions, bonuses, tips Operating a business Operating a business S14,250.00 Operating a business Operat	List each source and the gross inco No Yes. Fill in the details. From January 1 of current year until	Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below. Social Security	(before deductions and exclusions)	
For last calendar year: (January 1 to December 31, 2024) Wages, commissions, bonuses, tips Operating a business Operating a busine	List each source and the gross inco	Debtor 1 Sources of income	tely. Do not include income the description of the	Debtor 2 Sources of income	(before deductions	
For last calendar year: (January 1 to December 31, 2024) Wages, commissions, bonuses, tips Operating a business Wages, commissions, bonuses, tips Operating a business For the calendar year before that: (January 1 to December 31, 2023) Wages, commissions, bonuses, tips Operating a business For the calendar year before that: (January 1 to December 31, 2023) Wages, commissions, bonuses, tips Operating a business For the calendar year before that: (January 1 to December 31, 2023) Wages, commissions, bonuses, tips Operating a business S14,250.00 Wages, commissions, bonuses, tips Operating a business Doperating a business S14,250.00 Wages, commissions, bonuses, tips Operating a business Doperating a business S14,250.00 Wages, commissions, bonuses, tips Operating a business Doperating a business S14,250.00 Wages, commissions, bonuses, tips Operating a business Doperating a business List you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemploymer and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4.	List each source and the gross inco		•	nat you listed in line 4.		
For last calendar year: (January 1 to December 31, 2024) Wages, commissions, bonuses, tips Operating a business S+3,118.40 Wages, commissions, bonuses, tips Operating a business Operating a business	List each source and the gross inco	ome from each source separa	•	•		
Check all that apply. (before deductions and exclusions) \$43,118.40	Include income regardless of wheth and other public benefit payments;	ner that income is taxable. Exa pensions; rental income; inter	amples of <i>other income</i> are a rest; dividends; money collect	ted from lawsuits; royalties; ar		
Check all that apply.		☐ Operating a business		☐ Operating a business		
Check all that apply. Check all that apply. (before deductions and exclusions) Check all that apply. (before deductions and exclusions)			\$14,250.00			
Check all that apply. (before deductions and exclusions) Check all that apply. (before deductions and exclusions) Check all that apply. (before deductions and exclusions) (before deductions and exclusions) Wages, commissions, bonuses, tips Operating a business Wages, commissions, Wages, commissions, S-77,860.00 Wages, commissions,		Operating a business		☐ Operating a business		
Check all that apply. (before deductions and exclusions) Check all that apply. (before deductions and exclusions) Check all that apply. (before deductions and exclusions) The wages, commissions, bonuses, tips Check all that apply. (before deductions and exclusions) The wages, commissions, bonuses, tips			\$-77,860.00			
Check all that apply. (before deductions and exclusions) Check all that apply. (before deductions and exclusions) Check all that apply. (before deductions and exclusions) To last calendar year: (language 1 to December 31, 2024)		☐ Operating a business		☐ Operating a business		
Check all that apply. (before deductions and Check all that apply. (before deductions		•	\$43,118.40	•		
Courses of Income		Sources of income Check all that apply.	`	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	
Debtor 1 Debtor 2				Debtor 2		

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$8,575* or more?

□ No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$8,575* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

^{*} Subject to adjustment on 4/01/28 and every 3 years after that for cases filed on or after the date of adjustment.

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| Reshaad Reed | Case number (if known) | 25-20998 | |

			ve primarily consumer de d for bankruptcy, did you pa		al of \$600 or more	9?	
	■ No.	Go to line 7.					
	Yes	List below each credit	or to whom you paid a total domestic support obligation uptcy case.				
	Creditor's Name and	d Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for
7.	Insiders include your rof which you are an of	elatives; any general pa ficer, director, person in	cy, did you make a paym artners; relatives of any ger control, or owner of 20% of 1 U.S.C. § 101. Include pa	neral partners; partne or more of their voting	erships of which y g securities; and a	ou are a genera any managing a	I partner; corporations gent, including one for
	■ No□ Yes. List all payr	nents to an insider.					
	Insider's Name and	Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	insider? Include payments on o	you filed for bankrupted by guaranteed or cost	cy, did you make any pay	ments or transfer a	any property on a	account of a de	ebt that benefited an
	Insider's Name and		Dates of payment	Total amount	Amount you	Reason for	this payment
				paid	still owe	Include cred	
Pai	t 4: Identify Legal	Actions, Repossession	ns, and Foreclosures				
9.		ncluding personal injury	cy, were you a party in ar cases, small claims action				
	■ No □ Yes. Fill in the de	etails.					
	Case title Case number		Nature of the case	Court or agency		Status of th	e case
10.		you filed for bankrupt nd fill in the details below	cy, was any of your propo w.	erty repossessed, f	oreclosed, garni	shed, attached	, seized, or levied?
	■ No. Go to line 11 □ Yes. Fill in the in	-					
	Creditor Name and	Address	Describe the Property Explain what happened	ч	Date	•	Value of the property
11.		o make a payment bed	otcy, did any creditor, inc ause you owed a debt?	luding a bank or fir	nancial institutio	n, set off any a	mounts from your
	Creditor Name and	Address	Describe the action the	e creditor took	Date take	action was	Amount
12.		you filed for bankrupt eiver, a custodian, or a	cy, was any of your proponother official?	erty in the possess	ion of an assign	ee for the bene	fit of creditors, a

Official Form 107

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Debtor 1 Reshaad Reed Case number (if known) 25-20998

Pai	t 5: List Certain Gifts and Contributions							
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No Yes. Fill in the details for each gift.							
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value				
	Person to Whom You Gave the Gift and Address:							
14.	■ No	ptcy, did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?				
	☐ Yes. Fill in the details for each gift or col Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Dates you contributed	Value				
Pai	t 6: List Certain Losses							
	or gambling? ■ No □ Yes. Fill in the details.	tcy or since you filed for bankruptcy, did you lose any						
	how the loss occurred	Describe any insurance coverage for the loss nclude the amount that insurance has paid. List pending nsurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost				
Pai	t 7: List Certain Payments or Transfers							
16.	Within 1 year before you filed for bankrupt consulted about seeking bankruptcy or pr	tcy, did you or anyone else acting on your behalf pay or eparing a bankruptcy petition? eparers, or credit counseling agencies for services require		erty to anyone you				
	□ No							
	Yes. Fill in the details.							
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	Description and value of any property transferred	Date payment or transfer was made	Amount of payment				
	Willis & Associates 201 Penn Center Blvd Suite 310 Pittsburgh, PA 15235	costs \$500.00 legal fees \$800.00	April 14, 2025	\$800.00				
17.		tcy, did you or anyone else acting on your behalf pay of tors or to make payments to your creditors? You listed on line 16.	or transfer any prope	erty to anyone who				
	No No							
	Yes. Fill in the details.							
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment				

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Case number (if known) 25-20998

Debtor 1 Reshaad Reed

 Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). I include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. 							
	Person Who Received Transfer Address	Description and va property transferre		payme	be any property or ents received or debts a exchange	Date transfer was made	
	Person's relationship to you						
19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect No □ Yes. Fill in the details.		property to a s	self-settled	d trust or similar device of	f which you are a	
	Name of trust	Description and va	lue of the prop	erty trans	ferred	Date Transfer was	
						made	
Par	List of Certain Financial Accounts, Instru	ıments, Safe Deposit	Boxes, and Sto	rage Units	5		
20	Within 1 year before you filed for bankruptcy, w	vere any financial acc	ounts or instru	ımants hal	d in your name, or for you	ır hanafit ıclosad	
20.	sold, moved, or transferred? Include checking, savings, money market, or o houses, pension funds, cooperatives, associat	ther financial account	ts; certificates	of deposit			
	No	ions, and other imane	ciai ilistitutions) -			
	Yes. Fill in the details.						
		ast 4 digits of count number	Type of accourant instrument	nt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 year cash, or other valuables?	r before you filed for I	bankruptcy, an	y safe dep	osit box or other deposite	ory for securities,	
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acce Address (Number, Str State and ZIP Code)		Describe t	the contents	Do you still have it?	
22.	Have you stored property in a storage unit or p	lace other than your I	home within 1 y	year befor	e you filed for bankruptcy	?	
	No						
	Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		Describe (the contents	Do you still have it?	
Par	t 9: Identify Property You Hold or Control for	Someone Else					
23.	Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.						
	Tot someone.						
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prope (Number, Street, City, Sta Code)		Describe t	the property	Value	
Par	t 10: Give Details About Environmental Inform	ation					
	the purpose of Part 10, the following definitions						
	Environmental law means any federal, state, or	· local statute or regul	lation concerni	ng pollutio	on, contamination, release	es of hazardous or	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 5

Official Form 107

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Case number (if known) 25-20998 Debtor 1 Reshaad Reed

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Case Number Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 7: Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Employer Identification number		hazardous material, pollutant, contaminant, or similar term.							
No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Name of accountant or bookkeeper Reshaad Reed Iso Westminister Drive	Report all notices, releases, and proceedings that you know about, regardless of when they occurred.								
Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State an	24.	24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?							
Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Pertition Address (Number, Street, City, State and ZIP Code) Nature of the case Status of the case of the following connections to any business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address Name of accountant or bookkeeper Reshaad Reed Industry State and ZIP Code) Address (Number, Street, City, State and									
No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Case Number Case Number Case Number Name Address (Number, Street, City, State and ZIP Code) Nature of the case Status of tic case Status of tic case Status of tic case Name Address (Number, Street, City, State and ZIP Code) A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address Name of accountant or bookkeeper Reshaad Reed Indicate State and ZIP Code) Reshaad Reed Indicate State City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Dates business existed EIN: 5881			Address (Number, Street, City, State ar	Address (Number, Street, City, State and		ntal law, if you	Date of notice		
Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Name No Yes. Fill in the details. Case Title Court or agency Nature of the case Status of the case Statu	25.	Have you notified any governmental unit of	f any release of hazardous material?						
Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Nature of the case Status of the c		_							
No Yes. Fill in the details. Case Title Case Number Name Address (Number, Street, City, State and ZIP Code)			Address (Number, Street, City, State an			ntal law, if you	Date of notice		
Case Title Case Number Court or agency Name Address (Number, Street, City, State and ZIP Code) Part11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Reshaad Reed Iandscaping Indicate Case Status of the case Status of the case Status of the case Status of the case Status of the case Status of the case Status of the case Indicate, City, State and ZIP Code) Nature of the case Status of the case Status of the case Status of the case Indicate, City, State and ZIP Code) Nature of the case Status of the case Status of the case Indicate City, State and ZIP Code) Status of the case Indicate City, State and ZIP Code) Status of the case Indicate City, State and ZIP Code) Status of the case Indicate City, State and ZIP Code) Status of the case Indicate City, State and ZIP Code) Status of the case Indicate City, State and ZIP Code) Status of the case Indicate City, State and ZIP Code) Status of the case Indicate City, State City, State and ZIP Code) Status of the case Indicate City, State City, State and ZIP Code) Status of the Case Indicate City, State Ci	26.	Have you been a party in any judicial or ad	ministrative proceeding under any env	/ironm	nental law?	Include settlements a	and orders.		
Case Number Name Address (Number, Street, City, State and ZIP Code)									
27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed EIN: 5881			Name Address (Number, Street, City,			ase	Status of the case		
A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Reshaad Reed Iandscaping A member of a limited liability partnership (LLP) A member of a limited liability partnership (LLP) B partner in a partnership A partner in a partnership Check limits of a corporation Describe the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Employer Identification number Do not include Social Security number or IT Dates business existed EIN: 5881	Par	11: Give Details About Your Business or	Connections to Any Business						
□ A member of a limited liability company (LLC) or limited liability partnership (LLP) □ A partner in a partnership □ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation □ No. None of the above applies. Go to Part 12. ■ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Reshaad Reed 159 Westminster Drive An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation □ No. None of the above applies. Go to Part 12. ■ Yes. Check all that apply above and fill in the details below for each business. Employer Identification number Do not include Social Security number or IT Dates business existed EIN: 5881	27.			•		•	business?		
□ A partner in a partnership □ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation □ No. None of the above applies. Go to Part 12. ■ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Describe the nature of the business Name of accountant or bookkeeper Name of accountant or bookkeeper Dates business existed EIN: 5881									
□ An owner of at least 5% of the voting or equity securities of a corporation □ No. None of the above applies. Go to Part 12. ■ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Reshaad Reed 159 Westminster Drive Address Landscaping Employer Identification number Do not include Social Security number or IT Dates business existed EIN: 5881									
 No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name		_ ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `							
Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Reshaad Reed 159 Westminster Drive Describe the nature of the business Do not include Social Security number or IT Dates business existed EIN: 5881		☐ An owner of at least 5% of the voting or equity securities of a corporation							
Business Name Address (Number, Street, City, State and ZIP Code) Reshaad Reed 159 Westminster Drive Describe the nature of the business Employer Identification number Do not include Social Security number or IT Dates business existed EIN: 5881									
Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Name of accountant or bookkeeper Dates business existed EIN: 5881		Yes. Check all that apply above and fill in the details below for each business.							
Reshaad Reed Iandscaping EIN: 5881 159 Westminster Drive		Address			Employer Identification number Do not include Social Security number or ITIN.				
159 Westminster Drive		(Names), Success, Suy, State and 211 Society	name of accountant or bookkeeper		Dates business existed				
		159 Westminster Drive	landscaping						

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Case number (if known) 25-20998 Debtor 1 Reshaad Reed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. **Date Issued** Name **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Reshaad Reed Signature of Debtor 2 **Reshaad Reed** Signature of Debtor 1 Date May 10, 2025 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this infor	rmation to identify your	case:		
Debtor 1	Reshaad Reed			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT (OF PENNSYLVANIA	
Case number	25-20998			
(if known)				

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral What do you intend to do with the property that Did you claim the property secures a debt? as exempt on Schedule C? Creditor's **American Credit Acceptance**

Surrender the property.

☐ Retain the property and redeem it.

☐ Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

name: Description of 2016 Dodge Charger property **Location: 159 Westminster** Drive, Monroeville PA 15146 securing debt: **currently inoperable

☐ Surrender the property.	□ No

☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:

■ No

☐ Yes

Description of 159 Westminster Drive Monroeville, PA 15146 property **Allegheny County** securing debt: Residence

BSI Financial Srvs

Fair Market Value Determined By Comparable Sales

**purchased for \$335,000.00 in

July 2024

Debtor will continue to make monthly

payments -

Creditor's

name:

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Debtor 1 Reshaad Reed Case number (if known) 25-20998				
name: Description of property Description of Location	inance Corp dge Challenger n: 159 Westminster onroeville PA 15146	 □ Surrender the property. □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. ■ Retain the property and [explain]: □ Debtor will continue to make monthly payments 	□ No ■ Yes	
property securing debt: Allegher Residen Fair Mar By Com **purcha July 202	stminster Drive ville, PA 15146 ny County ce ket Value Determined parable Sales ased for \$335,000.00 in	□ Surrender the property. □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. ■ Retain the property and [explain]: Debtor will continue to make monthly payments□	□ No ■ Yes	
For any unexpired personal in the information below. Do	not list real estate leases. Une	n Schedule G: Executory Contracts and Unexpired eases are leases that are still in effect; the trustee does not assume it. 11 U.S.C. § 365(p)(2	lease period has not yet ended.	
Describe your unexpired p	ersonal property leases		Will the lease be assumed?	
Lessor's name: Description of leased Property: Lessor's name: Description of leased Property:			□ No□ Yes□ No□ Yes	
Lessor's name: Description of leased Property: Lessor's name:			□ No □ Yes □ No	
Description of leased Property:			☐ Yes	
Lessor's name: Description of leased Property:			□ No □ Yes	
Lessor's name: Description of leased Property:			□ No □ Yes	
Lessor's name: Description of leased Property: Part 3: Sign Below			□ No □ Yes	

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Der	Reshaad Reed	Case number (if known) 25-20998
	ler penalty of perjury, I declare that I have indicated reperty that is subject to an unexpired lease.	my intention about any property of my estate that secures a debt and any personal
Χ	/s/ Reshaad Reed	X
	Reshaad Reed	Signature of Debtor 2
	Signature of Debtor 1	
	Date May 10, 2025	Date

Fill in this info	remotion to identify your opposi							
	ormation to identify your case:			eck one 2A-1Su		irected ir	this form and	in Form
Debtor 1	Reshaad Reed							
Debtor 2 (Spouse, if filing)				■ 1. Tł	nere is no pres	umption	of abuse	
	Bankruptcy Court for the: Western District of	of Pennsylvania		а		nade und	ler <i>Chapter 7 N</i>	nption of abuse Means Test
Case number	25-20998				`		,	
(ii Kilowii)							t apply now be but it could ap	
				☐ Che	eck if this is a	n amen	ded filing	
Official I	Form 122A - 1							
Chapte	r 7 Statement of Your Cu	rrent Mon	thly Inc	ome	9			12/1
attach a separa case number (i qualifying milit Part 1: C	e and accurate as possible. If two married people the sheet to this form. Include the line number to version for the fundament of the statement of the statemen	which the additiona om a presumption of ption from Presum	al information a of abuse becau	ipplies. se you d	On the top of aid on the top of aid on the top of the t	ny addition narily cor	nal pages, write sumer debts o	e your name and r because of
	narried. Fill out Column A, lines 2-11.							
_	ied and your spouse is filing with you. Fill o			2-11.				
_	ied and your spouse is NOT filing with you.							
_	ving in the same household and are not leg				•			
рe	ring separately or are legally separated. Fill enalty of perjury that you and your spouse are ring apart for reasons that do not include evadi	legally separated	under nonban	kruptcy	law that applie	es or that		
101(10A). For the 6 months	verage monthly income that you received from all or example, if you are filing on September 15, the 6-n s, add the income for all 6 months and divide the tota n the same rental property, put the income from that	nonth period would but the result in the res	be March 1 throu ult. Do not includ	ugh Augu de any in	ust 31. If the amo	ount of you ore than o	ur monthly incom once. For exampl	e varied during le, if both
				Colum Debto		Colum Debto non-fil		
•	oss wages, salary, tips, bonuses, overtime, leductions).	and commission	ns (before all	\$	3,619.92	\$	5,301.64	
3. Alimon	y and maintenance payments. Do not include B is filled in.	payments from a	a spouse if	\$	0.00	\$	0.00	
of you of from an and room	unts from any source which are regularly por your dependents, including child support unmarried partner, members of your househol mmates. Include regular contributions from a spon ont include payments you listed on line 3.	t. Include regular d, your dependen	contributions its, parents,	\$	0.00	\$	0.00	
5. Net inco	ome from operating a business, profession,	or farm Debt	or 1					
Gross ro	penints (hoforo all doductions)	\$ 0.00	.01 1					
	eceipts (before all deductions) and necessary operating expenses	-\$ 0.00						
•	othly income from a business, profession, or fail		Copy here ->	\$	0.00	\$	0.00	
	ome from rental and other real property	ψ	.,			· —		
		Debt	or 1					
Gross re	eceipts (before all deductions)	\$0.00						
Ordinary	and necessary operating expenses	-\$ 0.00						
Net mor	thly income from rental or other real property	\$0.00	Copy here ->	\$	0.00	\$	0.00	
7 Interest	dividends and royalties			\$	0.00	\$	0.00	

Official Form 122A-1

7. Interest, dividends, and royalties

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Debto	Reshaad Reed			Case number	r (if known)	25-20998	
				Column A Debtor 1		Column B Debtor 2 o non-filing	
8.	Unemployment compensation			\$	0.00	\$	0.00
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	t received was a benef	it under				
	For you\$	0.	00				
	For your spouse \$		00				
9.	Pension or retirement income. Do not include any and benefit under the Social Security Act. Also, except as so not include any compensation, pension, pay, annuity, or United States Government in connection with a disability disability, or death of a member of the uniformed service pay paid under chapter 61 of title 10, then include that a does not exceed the amount of retired pay to which you if retired under any provision of title 10 other than chapter 10 other 10 other than chapter 10 other 10 other than chapter 10 other 10	nount received that wa tated in the next sente or allowance paid by the ty, combat-related inju- tes. If you received any pay only to the extent to u would otherwise be e	nce, do e ry or retired hat it	\$	0.00	\$	0.00
10.	Income from all other sources not listed above. Sp. Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hur domestic terrorism; or compensation pension, pay, and United States Government in connection with a disability, or death of a member of the uniformed service sources on a separate page and put the total below.	ecify the source and at Security Act; payments manity, or international nuity, or allowance paid ty, combat-related inju	or d by the ry or				
				\$	0.00	\$	0.00
				\$	0.00	\$	0.00
	Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the to		\$	3,619.92	+ \$ _	5,301.64	Total current monthly income
Part	2: Determine Whether the Means Test Applies t	o You					
12.	Calculate your current monthly income for the year	Follow these steps:					
	12a. Copy your total current monthly income from line 1	11		Сор	y line 11	here=>	\$8,921.56
	Multiply by 12 (the number of months in a year)						x 12
	12b. The result is your annual income for this part of the	e form				12b	\$107,058.72
13.	Calculate the median family income that applies to	you. Follow these step	os:				
	Fill in the state in which you live.	PA					
	Fill in the number of people in your household.	5					
	Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank	online using the link sp	pecified	in the separa	ate instruc	13.	\$136,854.00
14.	How do the lines compare?						
	14a. Line 12b is less than or equal to line 13. O Go to Part 3. Do NOT fill out or file Official		eck box	1, There is i	no presun	nption of abus	se.
	14b.		The pr	esumption of	abuse is	determined b	y Form 122A-2.
Part							
	By signing here, I declare under penalty of perjury	that the information or	n this sta	atement and	in any att	achments is ti	rue and correct.
	X /s/ Reshaad Reed						
	Reshaad Reed Signature of Debtor 1						
	Date May 10, 2025						

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If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Debtor 1 Reshaad Reed Case number (if known) 25-20998

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 10/01/2024 to 03/31/2025.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Department of Veterans Affairs

Year-to-Date Income:

Last Year:

Starting Year-to-Date Income: \$\frac{\$32,932.80}{\$43,118.40}\$ from check dated \$\frac{9/30/2024}{12/31/2024}\$.

This Year:

Current Year-to-Date Income: \$11,533.94 from check dated 3/31/2025.

Income for six-month period (Current+(Ending-Starting)): \$21,719.54.

Average Monthly Income: \$3,619.92 .

Non-CMI - VA Income

Source of Income: VA Disability

Income by Month:

6 Months Ago:	10/2024	\$4,200.00
5 Months Ago:	11/2024	\$4,200.00
4 Months Ago:	12/2024	\$4,200.00
3 Months Ago:	01/2025	\$4,200.00
2 Months Ago:	02/2025	\$4,200.00
Last Month:	03/2025	\$4,200.00
	Average per month:	\$4,200.00

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Debtor 1 Reshaad Reed Case number (if known) 25-20998

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period 10/01/2024 to 03/31/2025.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: All Care Pharmacy

Income by Month:

6 Months Ago:	10/2024	\$5,301.64
5 Months Ago:	11/2024	\$5,301.64
4 Months Ago:	12/2024	\$5,301.64
3 Months Ago:	01/2025	\$5,301.64
2 Months Ago:	02/2025	\$5,301.64
Last Month:	03/2025	\$5,301.64
	Average per month:	\$5,301.64

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$78	administrative fee
+ \$15	trustee surcharge
\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 25-20998-GLT Doc 15 Filed 05/10/25 Entered 05/10/25 16:50:28 Desc Main Document Page 50 of 52

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Western District of Pennsylvania

In re	Reshaad Reed		Case No.	25-20998			
		Debtor(s)	Chapter	7			
	DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)						

Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept Prior to the filing of this statement I have received 2. The source of the compensation paid to me was: Debtor ☐ Other (specify): 3. The source of compensation to be paid to me is: Debtor ☐ Other (specify): ■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. 4. ☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: 5.

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required:
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

One meeting and analysis of your financial problem, preparation and filing of the bankruptcy petition, attendance at one Section 341 Meeting, and normal correspondence with creditors, the bankruptcy trustee, and the client.

By agreement with the debtor(s), the above-disclosed fee does not include the following service: 6.

Services in addition to the ones outlined above may be billed separately at the discretion of Willis & Associates. Examples of additional work that would require payment of additional fees and costs include, but are not limited to; amendments to bankruptcy schedules, adversary proceedings, lien avoidances, any work related to the failure of the client to disclose or correct information contained in the bankruptcy petition, responses to motions for relief from stay, objections to discharge, reaffirmation agreements, and attendance at additional court hearings other than the originally-scheduled Section 341 Meeting. In Chapter 7 cases: representation in any dischargeability action, judicial lien avoidance or relief from stay action; court appearances or any adversary proceeding; fees and costs for amending schedules; responding to a United States Trustee audit; preparing and filing reaffirmation agreements; having the Bankruptcy Court excuse failure to complete Financial Education Course on time; defending discharge actions, contested judicial lien

avoidances or relief from stay actions; redemption actions; defending US Trustee's action to dismiss or convert case to another chapter; re-opening case once it has closed; travel to Bankruptcy Court in Pittsburgh; defendingTrustee's objections to exemptions; state court matters; bankruptcy issues arising after case closes; clearing

errors on credit report; or matters unrelated to bankruptcy. Willis & Associates will charge separately for these matters after first discussing them with client.

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In re	Reshaad Reed	Case No.	25-20998
	Debtor(s)		

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

Name of law firm

United States Bankruptcy Court Western District of Pennsylvania

In re	Reshaad Reed		Case No.	25-20998	
		Debtor(s)	Chapter	7	
	VER	IFICATION OF CREDITOR M	ATRIX		
Γhe ab	ove-named Debtor hereby verifies	that the attached list of creditors is true and corr	rect to the best	of his/her knowledge.	

/s/ Reshaad Reed
Reshaad Reed
Signature of Debtor

Date: May 10, 2025